

MACOMB TOWNSHIP

54111 Broughton Road • Macomb, MI 48042 • 586-992-0710 www.macomb-mi.gov

APPLICATION FOR ADDRESS REQUEST METER OR OTHER ADDRESS

Type of Request:	Electrical Meter	Water Meter	Other
Development Name:			
Parcel Number(s): 08			
Parcel Street Name:			
Please submit the follow	ving to Crystal Kozak at <u>k</u>	ozakc@macomb-mi.gov:	
 Location of m Clearly indica Written approval from (WATER METER ONLY) 	te on the sketch the type om the Water & Sewer Y).	Department Superintender	nt verifying the location
		owner must approve via sigr	
Owner Signature		Owner Name (if different t	han Requestor)
Requestor's Address		Requestor's Phone	#
Requestor's Email Addre	SS		
 Date Submitted			